

**Procedure for Application  
to the Illinois Commerce Commission to become a  
Private Emergency Answering Point**

**GENERAL INFORMATION**

This packet contains the application forms to be a Private Emergency Answering Point (PEAP) and a copy of the 83 Illinois Administrative Code Part 726 – **Requirements for Businesses with Private Business Switch Service to Comply with the Emergency Telephone System Act**. The Code states what is required of a PEAP.

The completed application will supply the Illinois Commerce Commission with information about your proposed PEAP. The information contained in your application may be used to support testimony at a Commission hearing in which representatives from your business/entity will make statements under oath.

If you are planning to modify an already existing system, please submit the exhibits that reflect changes in your original 9-1-1 plan previously filed with this Commission.

All documents in the application should be in the same order as listed in the Table of Contents. The cover letter to the Chief Clerk and Letter of Intent to the telephone company(s) are to be typed on your official stationery.

Prior to filing your application, we recommend that you send a draft copy of your plan to the Commission's 9-1-1 Program for review to ensure that all documents are properly completed.

All exhibits in the application must have the necessary signatures, notarization, dispatch information etc. No incomplete applications will be processed. When you are ready to file your final plan you must send one copy of your application to the Commission's 9-1-1 Program and a copy to the 9-1-1 System management. In addition, mail the original and three copies of the application to the:

Chief Clerk  
Illinois Commerce Commission  
527 East Capitol Avenue  
Springfield, Illinois 62701

Exhibits and/or modifications of application as required by 83 Illinois Administrative Code 726 can be accomplished by filing an Amended Petition and Verification with the Chief Clerk and approval of the Illinois Commerce Commission is needed.

If you have any questions about your application process, please contact the Commission's 9-1-1 Program at (217)782-4911, (217)524-5052 or (217)524-4228.

**SAMPLE PETITIONER AFFIDAVIT**  
***This page MUST be Retyped***

**PETITIONER AFFIDAVIT**

I, \_\_\_\_\_ (*appropriate official*) being duly sworn upon oath, depose and state that I am (*title*) \_\_\_\_\_ of the \_\_\_\_\_ (*business/entity*) that I have knowledge pertaining to the instruments hereafter described and that the facts set forth in the following instruments are true and correct:

- 1) Exhibit 1: A thorough explanation regarding the make-up of its security, fire and medical departments. Explain what these emergency responders' responsibilities are and how they are better able to respond to an incident internally than an outside agency. In addition, this exhibit shall indicate how each emergency responder will be dispatched within its facility.
- 2) Exhibit 2: Call handling agreements with the internal emergency responders.
- 3) Exhibit 3: Call handling agreements with the existing enhanced 9-1-1 system for additional back-up police, fire and medical assistance pursuant to Section 726.510(c).
- 4) Exhibit 4: Back-up PEAP agreement pursuant to Section 726.400(D).
- 5) Exhibit 5: Standard Operating Procedures and Disaster Procedures specified in Section 726.505.
- 6) Exhibit 6: Network Diagram - a chart showing the trunking configuration from the applicant's switch to the back-up PEAP pursuant to Section 726.400.

Further Affiant Sayeth Not.

\_\_\_\_\_  
Affiant

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

## TABLE OF CONTENTS

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|-------------------------|---|
| <b>Cover Letter</b>     | Letter to the Chief Clerk of the Commission filing your application.  |
| <b>Petition</b>         | An Order of Authority to Operate become a PEAP.   |
| <b>Verification</b>     | Document that verifies signature on petition.   |
| <b>Letter of Intent</b> | Letter that is sent to the 9-1-1 System providing service in the business/entity's area with a copy of the application.   |
| <b>Exhibit 1</b>        | A thorough explanation regarding the make-up of its security, fire and medical departments. Explain what these emergency responders' responsibilities are and how they are better able to respond to an incident internally than an outside agency. In addition, this exhibit shall indicate how each emergency responder will be dispatched within its facility. |
| <b>Exhibit 2</b>        | Call handling agreements with the internal emergency responders.  |
| <b>Exhibit 3</b>        | Call handling agreements with the existing enhanced 9-1-1 system for additional back-up police, fire and medical assistance pursuant to Section 726.510(c).   |
| <b>Exhibit 4</b>        | Back-up PEAP agreement pursuant to Section 726.400(D).  |
| <b>Exhibit 5</b>        | Standard Operating Procedures and Disaster Procedures specified in Section 726.505.   |
| <b>Exhibit 6</b>        | Network Diagram - a chart showing the trunking configuration from the applicant's switch to the back-up PEAP pursuant to Section 726.400.   |

**SAMPLE COVER LETTER**  
**Do Not Fill in Blanks**  
**This Page MUST be retyped**  
**Use Official Stationery**

**DATE**

Donna M. Caton  
Illinois Commerce Commission  
527 East Capitol Avenue  
Springfield, Illinois 62701

Dear Ms. Caton:

Please find enclosed an original and three copies of an application for approval of the establishment of a Private Emergency Answering Point for \_\_\_\_\_ *(business/entity)* \_\_\_\_\_.

Sincerely,

**SAMPLE PETITION**  
**Do Not Fill in Blanks**  
**This Page MUST be Retyped**

**STATE OF ILLINOIS**  
**ILLINOIS COMMERCE COMMISSION**

\_\_\_\_\_  
(Business/Entity) \_\_\_\_\_ :  
: Petition for Approval of a Private Emergency :  
: Answering Point :  
:

**PETITION**

Now comes \_\_\_\_\_ (Business/Entity) \_\_\_\_\_ and requests Illinois Commerce Commission approval of its Final Plan to establish a Private Emergency Answering Point and in support thereof states as follows:

1. Attached hereto and incorporated herein as though fully set forth is the Final Plan for (Business/Entity).
2. A duplicate original of said Final Plan has been filed by mail with the (Name) 9-1-1 System(s).
3. The Final Plan is intended to comply with the terms and provisions of "An Act in relation to the designation of an emergency telephone number for use throughout the State."

WHEREFORE, your Petitioner, (Business/Entity), prays that the Illinois Commerce Commission:

- (1) give notice of and conduct a public hearing on this Petition and Final Plan at the earliest possible date;
- (2) enter an Order approving the Final Plan submitted herewith and authorizing the implementation of the Private Emergency Answering Point described herein.

By \_\_\_\_\_ (Individual's Name) \_\_\_\_\_

Title \_\_\_\_\_

Business/Entity \_\_\_\_\_

**SAMPLE VERIFICATION**  
**Do Not Fill in Blanks**  
**This Page MUST be Retyped**

**VERIFICATION**

I, (appropriate official), first being duly sworn upon oath, depose and say that I am (title), of (business/entity); that I have read the above and foregoing petition by me subscribed and know the contents thereof; that said contents are true in substance and in fact, except as to those matters stated upon information and belief, and as to those, I believe same to be true.

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Subscribed and sworn to before me

this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

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NOTARY PUBLIC, ILLINOIS

**SAMPLE LETTER OF INTENT**  
**Do Not Fill in Blanks**  
**This Page MUST be Retyped**  
**Use Official Stationery**  
***This letter and complete application should***  
***be sent to each 9-1-1 System serving in your***  
***area.***

**LETTER OF INTENT**

**(Date)**

\_\_\_\_\_  
(9-1-1 Representative)

\_\_\_\_\_  
(9-1-1 System)

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(City, State, Zip Code)

Dear \_\_\_\_\_:

This letter is to inform you of our intent to provide our own internal 9-1-1 answering point. \_\_\_\_\_ (Business/Entity) is requesting certification from the Illinois Commerce Commission to become a Private Emergency Answering Point under the terms specified in 83 Ill. Admin. Code Part 726, "Requirements for Businesses with Private Business Switch to Comply with the Emergency Telephone System Act." Therefore, our facility's 9-1-1 calls will not be selectively routed to your 9-1-1 system. Enclosed is a copy of our petition and application to the Illinois Commerce Commission for your review. The application contains a thorough explanation of how we will be handling emergency calls within our facility.

Thank you for your attention to this matter.

Sincerely,

(Name)  
(Title)  
(Business/Entity)

enclosure: application

**9-1-1 GENERAL INFORMATION**

Current Date \_\_\_\_\_

Proposed Operational Date \_\_\_\_\_

Submitted by (*Business/Entity*) \_\_\_\_\_

\_\_\_\_\_ Tentative Plan

\_\_\_\_\_ Final Plan

\_\_\_\_\_ Modification of an Existing PEAP – I.C.C. Docket Number \_\_\_\_\_

\_\_\_\_\_ Total Employees Served

\_\_\_\_\_ Total Stations

\_\_\_\_\_ Total Square Feet Covered

**PEAP 9-1-1 Liaison to the Commission:**

\_\_\_\_\_ Name

\_\_\_\_\_ Title

\_\_\_\_\_ Street Address

\_\_\_\_\_ City, State, Zip Code

(       ) \_\_\_\_\_  
Telephone Number

(       ) \_\_\_\_\_  
Alternate Telephone Number

(       ) \_\_\_\_\_  
Fax Number

\_\_\_\_\_ Email Address



**EXHIBIT 1**  
***(Include the following items)***

Please provide a thorough explanation regarding the composition of the business/entity's security, fire and medical departments. Explain:

- These emergency responders responsibilities.
- How these emergency responders are better able to respond to an incident internally rather than an outside public safety agency.
- The exact location of the primary PEAP and backup PEAP within your business/entity; how PEAPs are set up; and when the PEAP is operational.
- How 9-1-1 calls will be dispatched by the PEAP to their emergency responders.
- How the PEAP will request additional emergency response from outside agencies if needed (i.e. through the existing 9-1-1 system).
- How the phone system works in providing the number and location information to the PEAP.
- Training.
- Use of TTY's and Training

Please provide in detail the features to be provided by your selective route.

In summary, the narrative should be a brief overview of each Exhibit within the Application.